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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Serial No: 10/815,298

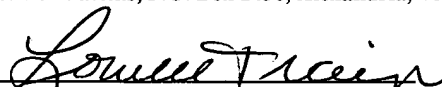
Filed: March, 31-2004

Attorney Docket No: DP-314505

Applicant: Michael Fink

TITLE: INFLATOR FOR VEHICLE PROTECTION APPARATUS

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on 1-27-2006.


Lowell M. Train

Commissioner For Patents
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TRANSMITTAL LETTER

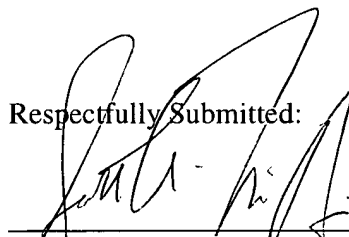
**Revocation of Power of Attorney With New Power of Attorney And
Correspondence Address**

Dear Sir:

Enclosed is an executed Revocation Of Power Of Attorney With New Power Of Attorney And Change Of Correspondence Address to be filed with the above-identified patent or patent application.

Please charge any necessary fee and any additional necessary fees, including any extension of time, or any other fee deficiencies to Delphi Technologies, Inc., Deposit Account No. 50-0831.

Respectfully Submitted:



SCOTT A. McBAIN, Attorney
Registration No: 37,181
Telephone: 248-813-1235

SAM:lt



PTO/SB/82 (04-05)
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**REVOCATION OF POWER OF
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AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/815,298
Filing Date	03-31-04
First Named Inventor	Michael F. Fink
Art Unit	
Examiner Name	
Attorney Docket Number	DP-314505

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number: 22,851

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

22,851

OR

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Individual Name

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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

Michael F. Fink, Vice President, Engineering, NxGen Technologies, LLC

Date

Telephone

11/28/05
602-312-3930

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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